

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

United Surgical Partners International, Inc. Political Action Committee

ADDRESS (number and street)

15305 Dallas Parkway, Suite 1600

☐Check if different  
than previously  
reported. (ACC)

Addison

TX

75001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00402073

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2010

through

05

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

J. Anthony Martin

Signature of Treasurer

Electronically Filed by J. Anthony Martin

Date

06

07

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 11

Write or Type Committee Name

United Surgical Partners International, Inc. Political Action Committee

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 5 | 0 | 1 | 2 | 0 | 1 | 0 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 5 | 3 | 1 | 2 | 0 | 1 | 0 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span style="border: 1px solid black; padding: 2px;">2010</span>                |                         | 108191.97                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 91888.22                |                                   |
| (c) Total Receipts (from Line 19) .....  | 6625.69                 | 39671.25                          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 98513.91                | 147863.22                         |
| 7. Total Disbursements (from Line 31) .....  | 35.61                   | 49384.92                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 98478.30                | 98478.30                          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 11

Write or Type Committee Name

United Surgical Partners International, Inc. Political Action Committee

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 0 | 5 | 0 | 1 | 2 | 0 | 1 | 0 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 5 | 3 | 1 | 2 | 0 | 1 | 0 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 6334.35                       | 38212.18                          |
| (ii) Unitemized .....  | 291.34                        | 1459.07                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 6625.69                       | 39671.25                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 6625.69                       | 39671.25                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (add 18(a) and 18(b)).  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                          | 6625.69                       | 39671.25                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 6625.69                       | 39671.25                          |

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS  |       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |       |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |       |                               |                                   |
| (i) Federal Share.....   | 0.00  | 0.00                          |                                   |
| (ii) Non-Federal Share.....  | 0.00  | 0.00                          |                                   |
| (b) Other Federal Operating Expenditures.....  | 35.61 | 384.92                        |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 35.61 | 384.92                        |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00  | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00  | 38000.00                      |                                   |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00  | 0.00                          |                                   |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00  | 0.00                          |                                   |
| 26. Loan Repayments Made.....  | 0.00  | 0.00                          |                                   |
| 27. Loans Made.....  | 0.00  | 0.00                          |                                   |
| 28. Refunds of Contributions To:   |       |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00  | 0.00                          |                                   |
| (b) Political Party Committees   | 0.00  | 0.00                          |                                   |
| (c) Other Political Committees (such as PACs) .....  | 0.00  | 0.00                          |                                   |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00  | 0.00                          |                                   |
| 29. Other Disbursements.....   | 0.00  | 11000.00                      |                                   |
| 30. Federal Election Activity (2 U.S.C 431(20))  |       |                               |                                   |
| (a) Shared Federal Election Activity (from Schedule H6)  |       |                               |                                   |
| (i) Federal Share .....  | 0.00  | 0.00                          |                                   |
| (ii) "Levin" Share .....   | 0.00  | 0.00                          |                                   |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00  | 0.00                          |                                   |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....              | 0.00  | 0.00                          |                                   |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..       | 35.61 | 49384.92                      |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 35.61 | 49384.92                      |                                   |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 11

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 6625.69                       | 39671.25                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 6625.69                       | 39671.25                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 35.61                         | 384.92                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 35.61                         | 384.92                            |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 11

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Thomas Cartwright

Mailing Address 17270 Red Oak Dr Suite 200

City

Houston

State

TX

Zip Code

77090-2632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tops

Occupation

Medical Doctor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1098.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: A982803CF0D4742CB8E4

Amount of Each Receipt this Period

507.05

**B.**

Full Name (Last, First, Middle Initial)

Peter Dawson

Mailing Address 606 Saddlewood Ln

City

Houston

State

TX

Zip Code

77024-5404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tops

Occupation

Medical Doctor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: A2467465837E74A38925

Amount of Each Receipt this Period

51.68

**C.**

Full Name (Last, First, Middle Initial)

Mark Eschenbach

Mailing Address 418 Forby Estates Drive

City

Eureka

State

MO

Zip Code

63025-2379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation

Regional VP

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 1 | 0 |

Transaction ID: A2E865F7345A1401AA41

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1058.73

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 11

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Ray Fitzgerald

Mailing Address 17270 Red Oak Dr., Ste. 200

City

Houston

State

TX

Zip Code

77090-2632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tops

Occupation

Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2214.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: AA5CE74BE50484343A62

Amount of Each Receipt this Period

507.05

**B.**

Full Name (Last, First, Middle Initial)

Christopher Hartshorn

Mailing Address 2617 Sun Meadow Drive

City

Chesterfield

State

MO

Zip Code

63005-7017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 1 | 0 |

Transaction ID: AABBB6E2661FD4C11816

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Steve Hendley

Mailing Address 2716 Sweetbriar

City

Edmond

State

OK

Zip Code

73034-6569

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: A23722764B776422EAEC

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1507.05

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Andy Johnston

Mailing Address 6225 Olympia Drive

City

Houston

State

TX

Zip Code

77057-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 1 0

Transaction ID: A3FF580272C934AF5BD7

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Milla Jones

Mailing Address 3216 Trevolte Place

City

Dallas

State

TX

Zip Code

75204-5539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 1 0

Transaction ID: AD0899249720A41D3BC5

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Maria Mitchell

Mailing Address 4949 Lylfield Dr

City

Dublin

State

OH

Zip Code

43017-2175

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 1 0

Transaction ID: A5586FDD2F6EC466C851

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 11

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Stephen Rose

Mailing Address 5330 Val Verde St

City

Houston

State

TX

Zip Code

77056-6221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tops

Occupation

Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: AFAD9507560FA4496BC9

Amount of Each Receipt this Period

58.56

**B.**

Full Name (Last, First, Middle Initial)

Mark N. Spina

Mailing Address 24 Hatchetts Hill Rd.

City

Old Lyme

State

CT

Zip Code

06371-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 1 | 4 |   | 2 | 0 | 1 | 0 |

Transaction ID: A5E0EF6DD15A94E7E953

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Steven Stern

Mailing Address 17070 Red Oak Dr Suite 201c

City

Houston

State

TX

Zip Code

77090-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tops

Occupation

Medical Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 0 |   | 2 | 0 | 1 | 0 |

Transaction ID: A2E15E8B1886D483CAC8

Amount of Each Receipt this Period

103.34

SUBTOTAL of Receipts This Page (optional) .....

461.90

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael Stroup

Mailing Address 3425 Hampton Ave.

City

Nashville

State

TN

Zip Code

37215-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 1 0

Transaction ID: A89A7AF7E59EA4825825

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Yeary

Mailing Address 3050 Post Oak Suite 620

City

Houston

State

TX

Zip Code

77056-6525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 1 0

Transaction ID: A040A42AE2C2845C5B7F

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

David Zarin

Mailing Address 17070 Red Oak Dr Suite 205

City

Houston

State

TX

Zip Code

77090-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Surgical Partners  
International

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.46

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 1 0

Transaction ID: A17095E20F4D94BD9923

Amount of Each Receipt this Period

206.67

**SUBTOTAL** of Receipts This Page (optional) .....

1206.67

**TOTAL** This Period (last page this line number only) .....

6334.35

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 11

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

United Surgical Partners International, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bank Of America

Mailing Address Bank of America, N.A.

City  
Dallas

State  
TX

Zip Code  
75283-0001

Purpose of Disbursement  
Bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: BE918C013D1FE41A0846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.61

SUBTOTAL of Disbursements This Page (optional) .....

35.61

TOTAL This Period (last page this line number only) .....

35.61